

FAMILY ASSESSMENT OF NEEDS AND STRENGTHS

Michigan Department of Human Services

Caretaker Name: _____

PS Case Number: _____

Load Number: _____

Assessment Date: _____

Rate the caretaker(s).

Score: Select one score under each category; select the highest score that applies.

		<u>Primary Caretaker</u>	<u>Secondary Caretaker</u>	<u>Need/ Strength</u>
S1. Emotional Stability	a. Exceptional coping skills -2 b. Appropriate responses 0 c. Some problems 3 d. Chronic depression, low esteem, emotional problems 5	<input type="text"/>	<input type="text"/>	<input type="text"/>
S2. Parenting Skills	a. Strong skills -2 b. Adequate skills 0 c. Improvement needed 3 d. Destructive/abusive parenting 5	<input type="text"/>	<input type="text"/>	<input type="text"/>
S3. Substance Abuse	a. No evidence of problem 0 b. Caretaker with some substance problem 2 c. Caretaker with significant problem 3 d. Problems resulting in chronic dysfunction 5	<input type="text"/>	<input type="text"/>	<input type="text"/>
S4. Domestic Relations	a. Supportive relationship -2 b. Single caretaker not involved in domestic relationship 0 c. Domestic discord, lack of cooperation 2 d. Significant domestic discord/domestic violence 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
S5. Social Support System	a. Strong support system -2 b. Adequate support system 0 c. Limited support system 2 d. No support or destructive relationships 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
S6. Interpersonal Skills	a. Appropriate skills 0 b. Limited or ineffective skills 2 c. Hostile/destructive 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
S7. Literacy	a. Literate 0 b. Marginally literate 2 c. Illiterate 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
S8. Intellectual Capacity	a. Average or above functional intelligence 0 b. Some impairment, difficulty in decision making skills 2 c. Significant limitation 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
S9. Employment	a. Employed -1 b. No need 0 c. Unemployed, but looking 1 d. Unemployed, not interested 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
S10. Physical Health Issues	a. No problem 0 b. Health problem or physical limitation that affects family 1 c. Significant health problems or physical limitation that affects ability to provide for or protect child 2	<input type="text"/>	<input type="text"/>	<input type="text"/>
S11. Resource Availability/ Management	a. Strong money management skills -1 b. Sufficient income to meet needs 0 c. Income mismanagement 2 d. Financial crisis 3	<input type="text"/>	<input type="text"/>	<input type="text"/>
S12. Housing	a. Adequate housing 0 b. Some housing problems, but correctable 2 c. No housing, eviction notice 4	<input type="text"/>	<input type="text"/>	<input type="text"/>
S13. Sexual Abuse	a. No evidence of problem 0 b. Caretaker failed to protect child(ren) from sexual abuse 4 c. Caretaker has abused child(ren) sexually 5	<input type="text"/>	<input type="text"/>	<input type="text"/>